

# STATEMENT OF ECONOMIC INTERESTS

Date Received  
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## COVER PAGE

*A Public Document*

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER
Kempton	Will		( 916 ) 654-5266
MAILING ADDRESS (May use business address)	STREET	CITY	STATE ZIP CODE
1120 N Street		Sacramento	CA 95814
			OPTIONAL: FAX / E-MAIL ADDRESS
			will.kempton@dot.ca.gov

### 1. Office, Agency, or Court

Name of Office, Agency, or Court:  
California Department of Transportation (Caltrans)

Division, Board, District, if applicable:  
Director's Office

Your Position:  
Director

► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)

Agency: See Attachment A

Position: Various

### 2. Jurisdiction of Office (Check at least one box)

- ☒ State
- ☐ County of \_\_\_\_\_
- ☐ City of \_\_\_\_\_
- ☐ Multi-County \_\_\_\_\_
- ☒ Other See Attachment A

### 3. Type of Statement (Check at least one box)

- ☐ Assuming Office/Initial Date: \_\_\_\_/\_\_\_\_/\_\_\_\_
- ☒ Annual: The period covered is January 1, 2008, through December 31, 2008.
- or-
- ☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2008.
- ☐ Leaving Office Date Left: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)
- ☐ The period covered is January 1, 2008, through the date of leaving office.
- or-
- ☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- ☐ Candidate Election Year: \_\_\_\_\_

### 4. Schedule Summary

- Total number of pages including this cover page: 2
- Check applicable schedules or "No reportable interests."
- I have disclosed interests on one or more of the attached schedules:
- Schedule A-1 ☐ Yes – schedule attached  
*Investments (Less than 10% Ownership)*
- Schedule A-2 ☐ Yes – schedule attached  
*Investments (10% or greater Ownership)*
- Schedule B ☐ Yes – schedule attached  
*Real Property*
- Schedule C ☐ Yes – schedule attached  
*Income, Loans, & Business Positions (Income Other than Gifts and Travel Payments)*
- Schedule D ☒ Yes – schedule attached  
*Income – Gifts*
- Schedule E ☐ Yes – schedule attached  
*Income – Gifts – Travel Payments*
- or-
- ☐ No reportable interests on any schedule

### 5. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 23, 2009  
(month day year)

Signature \_\_\_\_\_  
(File the originally signed statement with your filing official.)

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name Will Kempton
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► NAME OF SOURCE  
**Bob Margett**

ADDRESS  
**One Industry Hills Parkway, City of Industry, CA**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Bob Margett Breakfast Club**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 14 / 08	\$ 75	Gift Basket for
___ / ___ / ___	\$	speaking on Transp.
___ / ___ / ___	\$	issues.

► NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$	
___ / ___ / ___	\$	
___ / ___ / ___	\$	

► NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$	
___ / ___ / ___	\$	
___ / ___ / ___	\$	

► NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$	
___ / ___ / ___	\$	
___ / ___ / ___	\$	

► NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$	
___ / ___ / ___	\$	
___ / ___ / ___	\$	

► NAME OF SOURCE

ADDRESS

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
___ / ___ / ___	\$	
___ / ___ / ___	\$	
___ / ___ / ___	\$	

Comments: \_\_\_\_\_

Statement of Economic Interests  
Calendar Year 2008

California Form 700  
Fair Political Practices Commission

Name: **Will Kempton**

AGENCY / OFFICE	JURISDICTION	POSITION
San Diego Association of Governments	Other	Advisor to the San Diego Association of Governments Board of Directors